

EARLY VOTING BAL

TRANSPORT STATEMENT

~This form is to be completed each time the ballot box LOCK is OPENED for ballot transport~

At Location

Election Type: General ElectionElection Date: 11/08/2022Name of Location: **MCTEC-MARICOPA COUNTY ELECTIONS DEPARTMENT- DB - VC# 14136**BOX 1 OF 4Arrival Time: 5:50

Were there ballots to be picked up?



YES <If YES, complete lines 1-5



NO <If NO, complete lines 2-5

Completed Forms picked up?



YES



NONE

IS22008924 IS220089231) Red Box Seals # _____ & _____ <Indicate the seal numbers that were placed on ballot transport box2) Ballot Box Sealed/Checked on (Date) 11/7/22 (Time) 5:50 Date and time box was sealed/checked3) Location Staff Member (Signature) Hansen4) Transport Staff Member (Signature) [Signature]5) Transport Staff Member (Signature) [Signature]Departure Time: 6:01

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) [Signature]

Sign to acknowledge receipt from Transport Staff Member

Date/Time: 11/7/22 6:29

Date of Audit Match

Ballot Box Seals # 1522008924 & 1522008923 <If applicable, verify the seal numbers on the box match the above from locationCount of Ballots in Transport Bin # 4066-406Audit Agent (Signature) [Signature]

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: 11/7/22 6:31

Date of Audit Match

